

PART B - FEE(S) TRANSMITTAL

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29855 7590 07/19/2006

WONG, CABELLO, LUTSCH, RUTHERFORD & BRUCCULERI,
 L.L.P.
 20333 SH 249
 SUITE 600
 HOUSTON, TX 77070

Via USPTO EFS

October 17, 2006

/Raymond Reese/

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/761,718 01/20/2004 Noam Eshkoli 199-0227US 3719

TITLE OF INVENTION: METHOD AND APPARATUS FOR MIXING COMPRESSED VIDEO

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1400 \$300 \$0 \$1700 10/19/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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RAMAKRISHNAIAH, MELUR 2614 348-014070

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Wong, Cabello,**
 2 **Lutsch, Rutherford**
 3 **& Brucculeri, LLP**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Polycom, Inc.

Pleasanton, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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☐ A check is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **501922** Referencing atty. docket # **199-0227US**.

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature /Raymond Reese/

Date October 17, 2006

Typed or printed name Raymond Reese

Registration No. 47,891

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